BOARD OF TRUSTEES FY	2005-	-2006
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E-mail address

Date: Appointed

LIBRARY:			

Number of members constituting a full board: _____

Expires

				N	MEETING SC	HEDULE						
Meeting Time	July	August	September	October	November	December	January	February	March	April	May	June
Name						Name						
Chair						Address						
Address						City, State,	Zip+4					
City, State, Zip+4						Phone						
Phone						E-mail add	ress					
E-mail address			_			Date: Ap	pointed		Expires			
Date: Appointed		E	expires									
	·	•	•			Name						
Name						Address						
Vice-Chair						City, State,	Zip+4					
Address						Phone						
City, State, Zip+4						E-mail add						
Phone						Date: Ap	pointed		Expires			
E-mail address						ŀ	,					
Date: Appointed		E	Expires			Name						
Name						Address						
Secretary						City, State,	Zip+4					
Address						Phone						
City, State, Zip+4						E-mail add						
Phone						Date: Ap	pointed		Expires			
E-mail address						Γ						
						Name						
Date: Appointed			expires			Address						
Name						City, State,	Zip+4					
Treasurer						Phone						
Address						E-mail add		ı				
City, State, Zip+4						Date: Ap	pointed		Expires			
Phone												

Attach additional sheets if needed.